STATEMENT of EDUCATIONAL PURPOSE-NOTARY

Phone: 269.471.3334

Email: sfs@andrews.edu
Web: www.andrews.edu/SF

THIS DOCUMENT MUST BE SUBMITTED AS AN ORIGINAL. DO NOT FAX OR SCAN.

IDENTITY and STATEMENT of EDUCATIONAL PURPOSE

If the student is unable to appear in person at Andrews University to verify his or her identity, the student must provide a copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and the original notarized Statement of Educational Purpose provided below. To be signed only in presence of Notary.

| I certify that I | | an | the individual signin | g this Statement of Educational Pur | oose |
|---|-----------------------|--|--|--|-----------|
| (| print student's name) | a | tino marviadar signin | g this Statement of Educational Pur | 7050 |
| and that the federal stude attending Andrews University | | | nly be used for educat | cional purposes and to pay the cost of | f |
| Student's signature | | | Date | ID number | |
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| NOTARY'S CERTIFICATE | OF ACKNOWLEDGI | EMENT | | | |
| | | | | | |
| State of | | City/County of | | | eared |
| State of | , before me, | City/County of | (notary's name) | , personally app | eared |
| State of | , before me, | City/County of | (notary's name) | | eared |
| On(date) (printed name of sign | , before me, | City/County of | (notary's name) me on basis of satisf | , personally apparts actory evidence of Identification | eared |
| On(date) (printed name of sign | , before me,er) | City/County of | (notary's name) me on basis of satisf | , personally app | eared |
| (date) (printed name of sign | , before me,er) | City/County of | (notary's name) me on basis of satisf | , personally apparts actory evidence of Identification | eared |
| On(date) (printed name of sign | , before me,to | City/County of, and proved to be the above-named | (notary's name) me on basis of satisfooterson who signed th | , personally apparts actory evidence of Identification | |

Mail to: Andrews University

Office of Student Financial Services

4150 Administration Drive Berrien Springs, MI 49104-0750